NONPROFIT ORGANIZATION
ATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 C.F.R. 1.27(b), 1.27(c)(2)(ii))

I hereby declare that I am identified as an inventor of the subject matter of the application identified herein with

nonprom organiz	zation identified be	low.		M.
NAME OF ORGANIZATION: ADDRESS OF		Parker Hughes Institute 2699 Patton Road		A E C
ORGANIZATION: Roseville, MN 55113				
d) WOULI U.S.C.501(a) AN e) WOULI OF STA OF AMI	SOFIT SCIENTIFIES OF AMERICA - D QUALIFY AS TO 501(c)(3)) IF L D QUALIFY AS N. TE OF THE UNITERICA that the nonprofit of for purposes of par	C OR EDUCATIONAL C - (NAME OF STATU) (CITATION OF STATU) (AX EXEMPT UNDER IN OCATED IN THE UNITE (ONPROFIT SCIENTIFIC (FED STATES OF AMERI (NAME OF STATE) (CITATION OF STATU) organization identified aboving reduced fees under Se	TE) STERNAL REVENUE SERVICED STATES OF AMERICA C OR EDUCATIONAL UNDEF CCA IF LOCATED IN THE UN TE) Eve qualifies as a nonprofit orga ection 41(a) and (b) of Title 35,	CE CODE (26 R STATUTE NITED STATES Inization as defined in United States Code, in
			TIONS AND THERAPEUTIC	USE THEREOF, by
_		i and Fatih M. Uckun desc	cribed in	
a) 🗌	the specification	filed herewith.		
b) 🗌	provisional applic	eation serial no fil	ed	
c) 🔀	non-provisional a	pplication serial no. <u>09/96</u>	0,464, filed September 19, 200	<u>)1</u> .
d) [patent no, iss	ued		
	that rights under co e above-identified		onveyed to and remain with the	nonprofit organization
entitlement to sm	all entity status pr	or to paying, or at the time	otification of any change in state of paying, the earliest of the is entity is no longer appropriate.	ssue fee or any
information and b willful false state Title 18 of the Ur	pelief are believed ments and the like nited States Code,	to be true; and further that so made are punishable b and that such willful false	nowledge are true and that all so these statements were made w y fine or imprisonment, or both statements may jeopardize the this verified statement is direct	ith the knowledge that under Section 1001 of validity of the
NAME:	Fatih M.	Uckun		
TITLE:	Doulson U	inahas Instituta		
ADDRESS:	2699 Pat	ughes Institute ton Road e, MN 55113		
SIGNATURE:				
		12-3-01		
DATE:		12-3-01		